

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: MailMail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. Advance correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

7590

02/17/2004

Lisa A Haile Ph D
Gray Cary Ware & Friedenrich LLP
4365 Executive Drive Suite 1100
San Diego, CA 92121-2133

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Aldon Griffis	(Depositor's name)
<i>Aldon Griffis</i>	(Signature)
April 21, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/500,700	02/09/2000	Carlos F. Barbas III	SCRIP1160-4	2975

TITLE OF INVENTION: ZINC FINGER PROTEIN DERIVATIVES AND METHODS THEREFOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	05/17/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
LEFFERS JR, GERALD G	1636	530-400000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 GRAY CARY WARE & FRIEDENRICH, LLP

2 _____
3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

The Scripps Research Institute

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

La Jolla, California

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee
- ☒ Advance Order - # of Copies Ten (10)

4b. Payment of Fee(s):

☒ A check in the amount of the fee(s) is enclosed. \$1,660.00☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1355 (enclose an extra copy of this form).

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) *Lisa A. Haile* (Date) April 21, 2004
Lisa A. Haile, Reg. 38,347

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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04/26/2004 MALI22 00000034 09500700

01 FC:1501	1330.00 OP
02 FC:1504	300.00 OP
03 FC:0001	30.00 OP

TRANSMIT THIS FORM WITH FEE(S)



PATENT
Attorney Docket No.: SCRIP1160-4

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Barbas III et al. Art Unit: 1636
Application No.: 09/500,700 Examiner: G.G. Leffers, Jr.
Filed: February 9, 2000 Conf. No. 7737
Title: ZINC FINGER PROTEIN DERIVATIVES AND METHODS THEREFOR

Mail Stop ISSUE FEE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO NOTICE OF ALLOWANCE

Sir:

In response to the Notice of Allowance mailed February 17, 2004, enclosed are the completed Issue Fee Transmittal Form PTOL-85B and Check No. 555383 in the amount of \$1,660.00 for the required Issue/Publication Fees and a request for Ten (10) advance patent copies.

The Commissioner is hereby authorized to charge any other fees associated with the filing submitted herewith, or credit any overpayments, to Deposit Account No. 50-1355.

Respectfully submitted,

Date: April 21, 2004

Lisa A. Haile, J.D., Ph.D.
Registration No.: 38,347
Telephone: (858) 677-1456
Facsimile: (858) 677-1465

USPTO CUSTOMER NUMBER 28213
GRAY CARY WARE & FREIDENRICH LLP
4365 Executive Drive, Suite 1100
San Diego, California 92121-2133

CERTIFICATION UNDER 37 CFR §1.8

I hereby certify that the documents referred to as enclosed herein are being deposited with the United States Postal Service as first class mail on this date, **April 21, 2004**, in an envelope addressed to: Mail Stop ISSUE FEE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Aldon Griffis
(Name of Person Mailing Paper)

(Signature)

April 21, 2004
(Date)



PATENT
Attorney Docket No.: SCRIP1160-4

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Barbas III et al. Art Unit: 1636
Application No.: 09/500,700 Examiner: G.G. Leffers, Jr.
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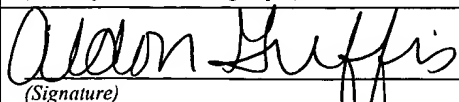
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P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL SHEET

Sir:

Transmitted herewith for the above-identified application, please find:

1. Response to Notice of Allowance mailed February 17, 2004 (1 page);
2. Form PTOL-85B Issue Fee Transmittal (*in duplicate*) (1 page);
3. Check No. 555383 in the amount of \$1,660.00; and
4. Return Receipt Postcard.

CERTIFICATION UNDER 37 CFR §1.8	
I hereby certify that the documents referred to as enclosed herein are being deposited with the United States Postal Service as first class mail on this date, April 21, 2004 , in an envelope addressed to: Mail Stop ISSUE FEE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Aldon Griffis (Name of Person Mailing Paper)	
 (Signature)	April 21, 2004 (Date)

In re Application of:
Barbas III et al.
Application No.: 09/500,700
Filed: February 9, 2000
Page 2

PATENT
Attorney Docket No.: SCRIP1160-4

Enclosed is Check No. 555383 in the total amount of \$1,660.00; which consists of \$1,330.00 for the Issue Fee, \$300.00 for the Publication Fee and \$30.00 for the Advance Order Fee for Ten (10) Patent Copies. The Commissioner is hereby authorized to charge any other fees that may be associated with this communication, or credit any overpayment to Deposit Account No. 50-1355. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

Date: April 21, 2004



Lisa A. Haile, J.D., Ph.D.
Registration No. 38,347
Telephone: (858) 677-1456
Facsimile: (858) 677-1465

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